## VOLUNTARY SURRENDER MARIKA MATTHEWS, A00127791

Gary N. Hicks, MS, RN, CEN, CNE President, Maryland Board of Nursing 4140 Patterson Avenue Baltimore, Maryland 21215-2254

> RE: Surrender of Certificate to Practice as a Certified Nursing Assistant, Certificate Number A00127791

Dear Mr. Hicks:

I agree to voluntarily surrender my certificate to practice as a certified nursing assistant ("CNA"), certificate number A00127791, to the Maryland Board of Nursing (the "Board"). I understand that I may not practice as a CNA, with or without compensation, as it is defined in the Maryland Nurse Practice Act (the "Act"), Md. Code Ann., Health Occ. §§ 8-6A-01 et seq., and the Board's regulations, COMAR 10.39.01 et seq. In other words, as of the effective date of this Voluntary Surrender, I understand that I am in the same position as an uncertified individual. I understand that this Voluntary Surrender shall become a PUBLIC record and shall become effective on the date of the Board's acceptance of it. I agree that this letter may be released or published by the Board as a final decision and order under the Public Information Act, Md. Code Ann., Gen. Prov. §§ 4-101 et seq. (2014).

On or about May 27, 2014, the Board issued a <u>Consent Order of Stayed Suspension/Probation</u> (the "Order"). The Order affirmed the October 3, 2013, Summary Suspension of my CNA-GNA certificate; immediately stayed the suspension of my CNA-GNA certificate and placed my certificate to practice as a CNA-GNA on probation for a minimum of three (3) years. One of the conditions of probation was the requirement that I submit timely reports to the Board. According to Board records, I only submitted 19 of 31 required reports.

On March 30, 2022, the Board issued a Notice of Agency Action — Charges under the Maryland Nurse Practice Act ("Charges"), charging my CNA certificate under § 8-6A-10(a)(9) (Has violated any order, rule, or regulation of the Board relating to the practice or certification of a nursing assistant or medication technician; to wit, Consent Order of Stayed Suspension/Probation issued on May 27, 2014); § 8-6A-10(a)(26) (When holding an expired certificate or a lapsed certificate, commits any act that would be grounds for disciplinary action under this section); and § 8-6A-10(a)(29) (Engages in conduct that violates the code of ethics; to wit, COMAR 10.39.07.02(C) A certificate holder may not engage in the following behaviors that dishonor the practice, whether or not acting in the capacity or identity of a certificate holder, including, but not limited to: (13) Misrepresenting or concealing a material fact in obtaining a certificate, renewing a certificate, or reinstating a certificate).

## MATTHEWS, Marika (A00127791) Voluntary Surrender

I agree the Board has enough evidence to prove by a preponderance of the evidence the above violations cited in the Charges issued on March 30, 2022, and may sanction my CNA certificate accordingly, pursuant to Health Occ. § 8-6A-10 and COMAR 10.27.26. I understand that, by executing this Voluntary Surrender, I am waiving the right, now and in the future, to any evidentiary hearing at which I would have the right to counsel, to confront witnesses, to give testimony, to call witnesses on my own behalf, and to contest the facts summarized in this Voluntary Surrender, and at which I would have the right to all other substantive and procedural protections provided by law, including the right to appeal.

In executing this agreement to surrender my CNA certificate to the Board, I agree that I will not apply for reinstatement for a period of ONE (1) YEAR following the date of the Board's acceptance of this Voluntary Surrender. I also agree that if, after a period of ONE (1) YEAR, I decide to apply for reinstatement as a CNA in Maryland, I will approach the Board in the same posture as an uncertified individual whose certificate has been revoked. In considering my application for reinstatement, the Board may review my entire Board file, including any information the Board receives after the execution of this letter. I understand that it will be my burden, as an applicant for reinstatement, to demonstrate that I meet all of the Board's requirements for reinstatement of my license or certificate at the time I submit a reinstatement application. I also understand that in considering any future application for reinstatement of my certificate, the Board may require me to undergo medical, psychological, and/or psychiatric evaluations, and drug and alcohol testing to determine my fitness to have my certificate reinstated. I understand that if the Board reinstates my certificate, it will be reinstated through the Board's disciplinary process and that my certificate will only be reinstated by the Board's issuance of a public order of reinstatement and that the Board may, in its discretion, place my reinstated certificate on probation subject to terms and conditions.

I acknowledge that I may not rescind this Voluntary Surrender in part or in its entirety for any reason whatsoever. I understand the nature and effect of both the Board's actions and this Voluntary Surrender fully. Finally, I wish to make clear that I have had an opportunity to discuss this matter with legal counsel and that I willingly, knowingly, and voluntarily sign this Voluntary Surrender.

Sincerely,

Marika Matthews

MATTHEWS, Marika (A00127791) Voluntary Surrender

NOTARIZATION	
CITY: Bethesda	
COUNTY: Montgomery	
I HEREBY CERTIFY that on this <u>04</u>	day of May 2022,
before me, Notary Public of the State and City/County aforesaid, Marika Matthews personally	
appeared, and made oath in due form of law that signing the foregoing Voluntary Surrender was	
the voluntary act and deed of Marika Matthews.	
AS WITNESSETH my hand and notarial seal.	
INNA M ANDERSON Notary Public - State of Maryland Montgomery Courty My Commission Expires Jul 8, 2024  My Commission Expires:	Inna Anderson Notary Public Sul 8, 2024
ACCEPTANCE	
ON BEHALF OF THE MARYLAND BOARD OF NURSING, on this day of	
June, 2022, I accept Marika Matthews' public Voluntary Surrender of her	
certificate to practice as a certified nursing assistant in the State of Maryland, certificate number	
A00127791.	1 ,
Date	Gary N. Hicks, MS, RN, CEN, CNE The Board President's Signature Appears on the Original Document  Maryland Board of Nursing
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